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Myrah L. Kirkwood 1 Oxford Term Expires: 06-30-06	Kathleen A.V. Lavery, 2 C.N.M. Jackson Term Expires: 06-30-09
Christopher E. Hermann, M.S.N. A.P.R.B., B.C., NP- C 1 Dearborn Heights Term Expires: 06-30-09	Amy M. Perry, R.N., M.S.N. 1 Ann Arbor Term Expires: 06-30-09
Laurice M. Bray, L.P.N. 1 Livonia Term Expires: 06-30-08	Kathryn E. Lawter 4 Columbiaville Term Expires: 06-30-06
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May 9, 2006

To Rep. Kooiman;

The West Michigan Nursing Advisory Council is concerned that appointments to the Michigan Board of Nursing (MiBON) have not been representative of this area of the state. We are disappointed that there are now no representatives from this area of the state. Western Michigan is not only the most populated area of Michigan outside of Detroit, but also houses a major concentration of the state's health related services, including nursing.

Apparently the Appointments Office does not take geographic distribution or recommendations from the nursing community into consideration. The nursing program administrators—MCNEA – Michigan Council of Nursing Education Administrators—represents all of the associate degree and practical nursing education programs in the state. These individuals recognize and understand the significance of having qualified and experienced nurse educators on the Board to assure quality nursing program monitoring and assessment. Their recommendations have not been honored.

As noted earlier, there are now no members of the board from Western Michigan. The following list details the regions from which the RNs and public member were appointed:

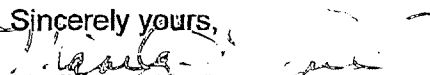
- Southeast – 4 RNs and 1 public member
- Southwest – 1 RN
- West Central – 0
- Mid-Michigan – 4
- East Central – 0
- North Central – 0
- Upper Peninsula – 1

From the choices that have been made, it is obvious that there is not a balanced representation from a regional standpoint, or from a population concentration basis.

In the last several years there have been at least ten professional members appointed to the board of nursing. Currently, of the professional members on the board, there are few who have more than 2-3 years of experience. It is likely that this causes a decrease in the MiBON's efficacy, as there is a very steep learning curve necessary to function effectively as a member of the Board. The result is that all professional members of the MiBON have less experience than previously. This situation may place the citizens of Michigan in a position of greater vulnerability since a less experienced board does not have the background, nor the benefit of mentoring by more experienced members in the determination of regulation or in educational program assessments. There is also an additional burden since the members lack the knowledge of prior decisions and deliberations when deciding future outcomes.

It appears to the members of the West Michigan Nursing Advisory Council, an arm of the Alliance for Health, that the appointments to the MiBON have not been made in the best interest of the people of Michigan. The resulting lack of experience on the board and lack of representation from western Michigan are of great concern at a time when important decisions will be made relative to the impending nursing shortage and the safety of the people of Michigan.

Sincerely yours,


Marilyn Smidt, RN, MSN
Past Chair, WMNAC

Appendix A

Health Service Areas

Current Members on the Michigan Board of Nursing Based on Health Service Areas

Health Service Area/Number of Members

Region 1: Southeast/ 10 members

Region 2: Southwest/ 3 members

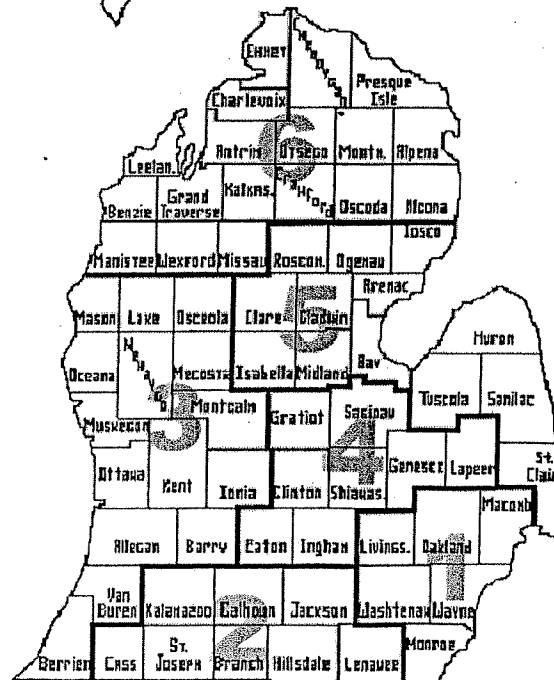
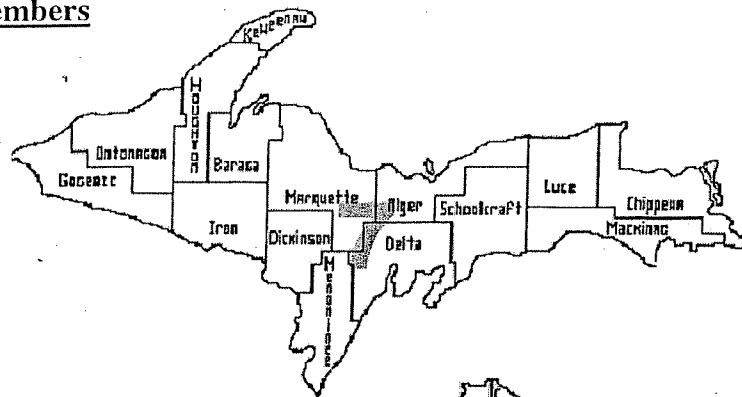
Region 3: West Central/ 1 member

Region 4: Mid-Michigan/ 5 members

Region 5: East Central/ 0 members

Region 6: North Central/ 2 members

Region 7: Upper Peninsula/ 1 member



Regions by Number

- 1 Southeast
- 2 Southwest
- 3 West Central
- 4 Mid-Michigan
- 5 East Central
- 6 North Central
- 7 Upper Peninsula

SOURCE: Study of the Current and Future Needs of the Professional Nursing Workforce in Michigan.